SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	2049	92	OF	=	2055	2
FOR	LINE	24	OF	F	DRM	зх

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NAME OF COMMITTEE (In Full) MOVEON ORC DOLLTICAL ACTION						
MOVEON.ORG POLITICAL ACTION	C C00341396					
Check if 24-hour report 48-hour report New report Amends report filed on						
Full Name (Last, First, Middle Initial) of Payee	Date					
Art Not War LLC	07 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 93 1st Place	Amount					
City State Zip Code						
Brooklyn NY 11231	1323.03					
Purpose of Expenditure	Transaction ID : SE.39017 Office Sought: House State: DC					
Production Costs Category/ Type	Senate District: 00					
Name of Federal Candidate Supported or Opposed by Expenditure:	X President					
MITT ROMNEY	Check One: Support Oppose					
Calendar Year-To-Date Per Election for Office Sought 233563.49	Disbursement For: Primary General 2012 Other (specify)					
Full Name (Last, First, Middle Initial) of Payee Date						
Art Not War LLC	07 31 Y 17					
Mailing Address 93 1st Place	Amount					
City State Zip Code	7500.40					
Brooklyn NY 11231	7566.19					
Purpose of Expenditure Category/	Transaction ID : SE.39020 Office Sought: House State: DC					
Purpose of Expenditure Production Costs Category/ Type	Senate District: 00					
Name of Federal Candidate Supported or Opposed by Expenditure:	President —					
MITT ROMNEY	Check One: Support Oppose					
Calendar Year-To-Date Per Election for Office Sought 271129.68	Disbursement For: Primary General 2012 Other (specify)					
(a) SUBTOTAL of Itemized Independent Expenditures	8889.22					
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures	·					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Wes Boyd [Electronically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Signature						